Lorm **88/1** (July 2000)

Notice of Section 527 Status

OMB No. 1545-1693

ivame of organization	<u>n</u>		Employer Identification
Name of organization Cincinnations for Haimleh			Employer Identification numb
2 Mailing address (P.O. Box or nur	TIONALON	or suite number)	31 : 1366960
POB 0x 8503	mydr, yardyd, arra roenn e	a sale hambery	
City or town, state, and ZIP code			
	45208-0503	\$	
N/A			
4a Name of custodian of records		59.09 Stewart Rd., Suite 1	
William Luchsinger		Cincinnati, OH 45277-1255	
Se Name of contact person		Contact person's address	ZCI W.S.S
·		5909 Stewart Rd.	Surtre I
5 . 1		^ .	
- William Luchsinge			27-1255
6 Business address of organization	i (if different from mailing	g address shown above). Number, street, a	ind room or suite number
City or town, state, and ZIP code	2		
Part II Purpose			
7 Describe the purpose of the orga	anization		
The grantization	in the principal	Il committee for candic	4 for Consinnati
A STATE OF THE STA		**************************************	Ġ.
City Council,	organized pursi	vant to Ohio law.	
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Part III List of All Related	Entities (see instru	actions)	
Part III List of All Related 8a Name of related entity	Entities (see instru	· 1	
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Ba Name of related entity		· 1	
Ba Name of related entity		· 1	
RECEIVED		· 1	
RECEIVED	8b Relationship	8c Address	Eng. 9971 /2 00
RECEIVED		· 1	Form 8871 (7-20

art IV List of All Officers, E	9b Title	Compensated Employees (see instructions) 9c Address
		5909 Stewart Rs., Sute 1
. William Luchsinger	Treasurer	Cincinnati, OH 45227-1255
J		
1 11.	Candidate	PO Box 8503
nilip Heinlich	Landidate	Concinenti, OH 45208 - 0503
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Under penalties of periury I dea	clare that the organization name	ed in Part I is to be treated as an organization described in section 527 of the In
Revenue Code, and that I have it is true, correct, and complete.	examined this notice, including	accompanying schedules and statements, and to the best of my knowledge and
100	\mathcal{I}	-6.1
gn Signature of authorized	Jew/	▶ 7/3//00